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DIVISION OF LURPORATIONS TALLAHASSEE, FLORIDA

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A. BUTLER MAY - 9 2022



## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: SUNSHINE REALT		TY FL, INC	
DOCUMENT NUMBI			
The enclosed Articles of Amendment and fee are submitted for filing.			
Please return all correspondence concerning this mat		tter to the following:	
(	CHARDAYNE SEUFFERT		
_		Name of Contact Person	
5	SUNSHINE REALTY FL, IN	IC .	
_		Firm/ Company	
:	3808 KISMET LAKES LAN	E	
-		Address	
•	CAPE CORAL FL 33993		
•		City/ State and Zip Code	
CHAR@CHARSHOMES.CO		OM .	
•	•	sed for future annual report	notification)
For further information	concerning this matter, please		671-6318
Name of Contact Person		Area Co	671-6318 de & Daytime Telephone Number
Enclosed is a check for the following amount made		payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi: P.O.	ing Address ndment Section sion of Corporations Box 6327 shassee, FL 32314	Amend Division The C 2415 1	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

FILED 2022 MAY -6 AM 6: 44 SECRETARY OF STATE TALLAHASSEE, FL

## Articles of Amendment to Articles of Incorporation of

SUNSHINE REALTY FL, INC	-	
	es currently filed with the	Florida Dept. of State)
P22000015782		
(Documen	Number of Corporation (if	known)
Pursuant to the provisions of section 607.1006, Florida Stitu Articles of Incorporation:	atutes, this Florida Profit Co	orporation adopts the following amends
A. If amending name, enter the new name of the corp	oration:	
	<del></del>	The ne
name must be distinguishable and contain the word "corpo "Inc.," or Co.," or the designation "Corp." "Inc.," o "chartered," "professional association," or the abbrevia	r "Co". A professional co	corporated" or the abbreviation "Corp., orporation name must contain the wor
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRI</u>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
D. If amending the registered agent and/or registered		
D. If amending the registered agent and/or registered new registered agent and/or the new registered off	ottice address in Piorida, ei ce address:	iter the name of the
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		, Florida
	(City)	(Zip Code)
N W. I		
New Registered Agent's Signature, if changing Registe hereby accept the appointment as registered agent. I an	red Agent:  a familiar with and accept the	e abligations of the services
,	- Januara ann and decept in	oungations of the position.

Signature of New Registered Avent. if changing

CROCK II UNDREADE	ck if applicable	e
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☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, no address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CE( Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each of President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:	r, unu ou	iy smiin, sv as an Aaa.	
X Change	PT	John Doe	
X Remove	Ā	Mike Jones	
_X Add	<u>sy</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	P	A. PETER ALDRIAN	8240 JUDGE BEAN RD
X Add			BOKEELIA FL 33922
Remove			
2) Change	P	CHARDAYNE T SEUFFERT	3808 KISMET LAKES LANE
Add			CAPE CORAL FL 33993
X Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			

ach additional sheets,	(f necessary).	cles, enter change(s) here: (Be spec(fic)
<u> </u>		
<u> </u>		
	<del></del> -	
	<del></del>	
<u></u>		
-	<u> </u>	
<del></del>		
·		
I( an amendment propositions for imple (if not applicable	ementing the a	xchange, reclassification, or cancellation of issued shares, mendment if not contained in the amendment itself:

	4/12/2022
The date of each amendment(s) adoptio date this document was signed.	n: if oth
Effective date if applicable: 4/12/2022	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this block dedocument's effective date on the Departme	oes not meet the applicable statutory filing requirements, this date will not be limit of State's records.
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were adopted by action was not required.	y the incorporators, or board of directors without shareholder action and sharehold
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient	y the shareholders. The number of votes cast for the amendment(s) t for approval.
☐ The amendment(s) was/were approved must be separately provided for each v	by the shareholders through voting groups. The following statement ofting group entitled to vote separately on the amendment(s):
"The number of votes cast for the	amendment(s) was/were sufficient for approval
by	, , , , , , , , , , , , , , , , , , ,
	(voting group)
4/12/2022	
Dated	
Signature	le -
(By a director,	president opomer officer - if directors or officers have not been
	incorporator - if in the hands of a receiver, trustee, or other court
appointed fidu	ciary by that fiduciary)
CHAR	DAYNE T. SEUFFERT
	(Typed or printed name of person signing)
PRESI	DENT
	(Title of person signing)